

DECLARATION AND POWER OF ATTORNEY

As the inventor, I hereby declare that:

My residence, citizenship and post office address are as stated below my name.

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled INTRAMEDULLARY NAIL-BASED BONE FRACTURE TREATMENT, the specification of which is attached hereto.

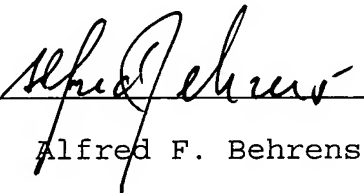
I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims.

I acknowledge the duty to disclose information of which I am aware which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

And I hereby appoint Arthur Jacob, Registration No. 19,702, and Richard M. Goldberg, Registration No. 28,215, whose address is 25 East Salem Street, P.O. Box 686, Hackensack, New Jersey 07602, and whose telephone number is (201) 488-8700, my attorneys with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Inventor's signature: _____



10/29/03
Date

Full name of inventor: Alfred F. Behrens

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